OFFICIAL FILE ILLINOIS COMMISSION

For Commission Use Only:

Case: 03-0390

FORMAL COMPLAINT 2023 JUN 12 A 11: 21 Illinois Commerce Commission

527 F. Capitol Avenue

OMET CLERA'S OFFICE Springfield, Illinois 62701

ORIGINAL

Regarding a complaint by (Perso	on making the complaint):	VERNA L. BETHEA	AND WEBELENI	E BETHEA	
Against (Utility name):		RGY AND PEOPLES	GAS, LIGHT, ETC	· .	
As to (Reeson for complaint)	SEE SEPARATE SHEET MARKED ITEM 1				
in CHICAGO	Minais.				
TO THE ILLINOIS COMMERCE CO	DMMISSION, SPRINGFIELD,	ILLINOIS:			
My mailing address is	1322	2 W. 72ND STREET			
The service address that I am co	implaining about is13	322 W. 72ND STREE	ΞT		
My home telephone is		[773)483-4 5	62		
Between 8:30 A.M. and 5:00 P.M.	. weekdays, I can ba reacha.	ля [<u>773_]483-45</u>	562		
(Full name of utility company) F to the provisions of the Illinois P		Y AND PEOPLES GA	AS (responden	nt) is a public utility and is subject	
In the space below, list the speci We are unable to re		-	•	•	
of the ICC to inform	n him that they did	d send me the samp	le, the procedura	al manual for the ICC	
hearing and a blan	k formal complain	it form. But, accordi	ng to the sample	, I needed to know	
the state statute? o	r law that I neede	d to write down. Mr	. Ruiz told me tha	at it was not necessar	y
and just state that y	ou want a Hearin	g. So, my request is	s for a Hearing.	·	
Have you contacted the Consume	r Services Division of the Mi	in ois Commerce Commission ab	out your complaint?	☑ Yes □ No	F-01
Has your complaint filed with that		ON'T KNOW BECAU OT ANY TANGIBLE (Yes No NUMER	ous

Please state your complaint briefly. Number each of the paragraphs. Please include time period and dollar amounts involved with your complaint. Use an extra sheet of paper if needed.

SEE SEPARATE SHEET MARKED ITEM 1

	Please clearly state what you want the Commission to do in this case:Peoples Energy and Peoples Gas need to acknowledge this or and the continued coverup that followed this erroneous bill. This failure and their continued failure to
	ept payment arrangements has and have placed undue hardship, inconvenience, worry and stress on use has resulted in continuing health and financial concerns and therefore we are also asking for \$25,000.0
ron	n each and all additional costs associated with this erroneous bill. Denne L Beller
	(Month, day, year) Verna L. Bethea
	If an atturney will represent you, please give the attorney's name, address, and telephone number.
	You need to file the original with the Commission. Also, provide one copy for each utility complained about (referred to as respondents).
	VERIFICATION
C	A notary public must witness the completion of this part of the form. **College Rome Clemat Betters** being duly sworn, say that I have read the above petition and know what it says. The contents of this petition are true to the best of the knowledge. (Signature) Clebelore Rome Company Roman Lebelore (Signature) Clebelore Roman Roman Lebelore (Signature) Clebelore Roman Roman Lebelore (Signature) Clebelore (Signature) Clebelo
	Subscribed and sworn/affirmed to before me on (month, day, year) 06-10-2003
L	Blucky Public, Illinoise "OFFICIAL SEAL" BEVERLY THOMAS Notary Public, State of Illinois My Commission Expires August 13, 2003

NOTE: failure to answer all of the questions on this form may result in this form being returned without processing. If you have questions, please call

the counselor in the Consumer Services Division that handled your informal complaint.

lcc207/07